

**P110000348873**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850) 617-6381

From: Account Name : NATIONAL REGISTERED AGENTS, INC.  
Account Number : I20030000062  
Phone : (609) 716-0300  
Fax Number : (609) 716-0820

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION**  
**Lasde Corp.**

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$78.75

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April 20, 2011

FLORIDA DEPARTMENT OF STATE

NATIONAL REGISTERED AGENTS, INC. Division of Corporations

SUBJECT: LASEDE CORP.  
REF: W11000022182

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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Valerie Herring  
Regulatory Specialist II  
New Filing Section

FAX Aud. #: H11000103428  
Letter Number: 311A00008596

*4/21 → See Revised documents Attached*

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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APPROVED  
AND  
FILED

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**The name of the corporation shall be: **Lasede Corp****ARTICLE II PRINCIPAL OFFICE**Principal street address  
36 NE First Street  
Suite 953  
Miami, Florida 33132

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Importing wine and liquor

**ARTICLE IV SHARES**The number of shares of stock is: **500 shares****ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Lucia Laura - President

Address: 1306 Route 9D

P.O. Box 174

Garraon, NY 10524

Name and Title:

Address:

Name and Title: Anna Secola - Vice President

Address: 55 Wall Street

Valhalla, New York 10595

Name and Title:

Address:

Name and Title: Massimo Delle Donne

Address: 112 First Avenue

Pelham, New York 10803

Name and Title:

Address:

**ARTICLE VI REGISTERED AGENT**The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:Name: Rosaria Delle DonneAddress: 36 NE First Street, Suite 953Miami, Florida 33132**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:Name: Rosaria Delle DonneAddress: 36 NE First Street, Suite 953Miami, Florida 33132

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Rosaria Delle Donne

x Rosaria Delle Donne  
Required Signature/Registered Agent

3/29/2011

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

x Rosaria Delle Donne  
Required Signature/Incorporator

3/29/2011

Date

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TALLAHASSEE, FLORIDA

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